



12-15-03

36218

Express Mail Label No.: EV 192310162 US

TRANSMITTAL
FORM

Application Serial Number	09/802,278
Filing Date	March 8, 2001
First Named Inventor	Juels
Group Art Unit	3621
Examiner Name	Elisca
Attorney Docket No.	RSA-044
Patent No.	Not applicable
Issue Date	Not applicable

RECEIVED

DEC 1 9 2003

GROUP 3600

ENCLOSURES (check all that apply)

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input checked="" type="checkbox"/> Check Attached
<input type="checkbox"/> Copy of Fee Transmittal Form

<input checked="" type="checkbox"/> Amendment/Response
<input type="checkbox"/> Preliminary
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____]

<input checked="" type="checkbox"/> Petition for Extension of Time (3 months)

<input type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Form PTO-1449
<input type="checkbox"/> Copies of IDS Citations

<input type="checkbox"/> Certified Copy of Priority Document(s)

<input type="checkbox"/> Sequence Listing submission
<input type="checkbox"/> Paper Copy/CD
<input type="checkbox"/> Computer Readable Copy
<input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application

<input type="checkbox"/> Formal Drawing(s)

<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal

<input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)

<input type="checkbox"/> Terminal Disclaimer

<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application

<input type="checkbox"/> Small Entity Statement

<input type="checkbox"/> CD(s) for large table or computer program

<input type="checkbox"/> Amendment After Allowance

<input type="checkbox"/> Request for Certificate of Correction
<input type="checkbox"/> Certificate of Correction (in duplicate) | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences

<input type="checkbox"/> Appeal Brief (in triplicate)

<input type="checkbox"/> Status Inquiry

<input checked="" type="checkbox"/> Return Receipt Postcard

<input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8

<input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8

<input type="checkbox"/> Additional Enclosure(s) (please identify below) |
|---|---|--|

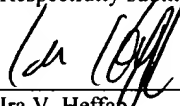
CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator
Testa, Hurwitz & Thibault, LLP
High Street Tower
125 High Street
Boston, MA 02110
Tel. No.: (617) 248-7000
Fax No.: (617) 248-7100

SIGNATURE BLOCK

Date: December 12, 2003
Reg. No. 41,059
Tel. No.: (617) 248-7176
Fax No.: (617) 248-7100

Respectfully submitted,


Ira V. Heffan
Attorney for Applicant
Testa, Hurwitz & Thibault, LLP
High Street Tower
125 High Street
Boston, MA 02110

FREE TRANSMITTAL
FY 2004

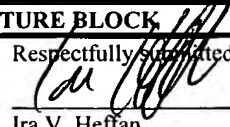
Complete in brown

Application Serial Number	09/802,278
Filing Date	March 8, 2001
First Named Inventor	Juels
Group Art Unit	3621
Examiner Name	Elisca
Attorney Docket No.	RSA-044

RECEIVED

DEC 19 2003

GROUP 3600

METHOD OF PAYMENT				FEE CALCULATION (continued)																																																																																							
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other				3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>130</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>50</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>130</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>2,520</td> <td>2,520</td> <td>Request for ex parte reexamination</td> <td></td> </tr> <tr> <td>110</td> <td>55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>420</td> <td>210</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>950</td> <td>475</td> <td>Extension for reply within third month</td> <td>950.00</td> </tr> <tr> <td>1480</td> <td>740</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>2010</td> <td>1005</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>330</td> <td>165</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>330</td> <td>165</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>290</td> <td>145</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>130</td> <td>130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>180</td> <td>180</td> <td>Submission of Information Disclosure Statement</td> <td></td> </tr> <tr> <td>770</td> <td>385</td> <td>Filing a submission after final rejection (37 CFR 1.129(a))</td> <td></td> </tr> <tr> <td>770</td> <td>385</td> <td>For each additional invention to be examined (37 CFR 1.129(b))</td> <td></td> </tr> <tr> <td>100</td> <td>100</td> <td>Certificate of Correction for applicant's error</td> <td></td> </tr> <tr> <td>110</td> <td>55</td> <td>Submission of Terminal Disclaimer</td> <td></td> </tr> <tr> <td colspan="2">Other fee (Specify)</td> <td colspan="2"></td> </tr> <tr> <td colspan="2">Other fee (Specify)</td> <td colspan="2"></td> </tr> </tbody> </table>				Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		110	55	Extension for reply within first month		420	210	Extension for reply within second month		950	475	Extension for reply within third month	950.00	1480	740	Extension for reply within fourth month		2010	1005	Extension for reply within fifth month		330	165	Notice of Appeal		330	165	Filing a brief in support of an appeal		290	145	Request for oral hearing		130	130	Petitions to the Commissioner		180	180	Submission of Information Disclosure Statement		770	385	Filing a submission after final rejection (37 CFR 1.129(a))		770	385	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		110	55	Submission of Terminal Disclaimer		Other fee (Specify)				Other fee (Specify)			
Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid																																																																																								
130	65	Surcharge - late filing fee or oath																																																																																									
50	25	Surcharge - late provisional filing fee or cover sheet																																																																																									
130	130	Non-English specification																																																																																									
2,520	2,520	Request for ex parte reexamination																																																																																									
110	55	Extension for reply within first month																																																																																									
420	210	Extension for reply within second month																																																																																									
950	475	Extension for reply within third month	950.00																																																																																								
1480	740	Extension for reply within fourth month																																																																																									
2010	1005	Extension for reply within fifth month																																																																																									
330	165	Notice of Appeal																																																																																									
330	165	Filing a brief in support of an appeal																																																																																									
290	145	Request for oral hearing																																																																																									
130	130	Petitions to the Commissioner																																																																																									
180	180	Submission of Information Disclosure Statement																																																																																									
770	385	Filing a submission after final rejection (37 CFR 1.129(a))																																																																																									
770	385	For each additional invention to be examined (37 CFR 1.129(b))																																																																																									
100	100	Certificate of Correction for applicant's error																																																																																									
110	55	Submission of Terminal Disclaimer																																																																																									
Other fee (Specify)																																																																																											
Other fee (Specify)																																																																																											
2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.																																																																																											
3. <input type="checkbox"/> Applicant claims small entity status.																																																																																											
FEE CALCULATION																																																																																											
1. FILING FEE <table border="1"> <thead> <tr> <th>Large Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>770</td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td>340</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>160</td> <td>Provisional filing fee</td> <td></td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th></th> <th>Number Filed</th> <th>Number Extra</th> <th>Rate</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>- 20 =</td> <td></td> <td>x \$ 18.00 =</td> <td></td> </tr> <tr> <td>Independent Claims</td> <td>- 3 =</td> <td></td> <td>x \$ 86.00 =</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Multiple Dependent Claim(s), if any</td> <td></td> <td></td> <td>\$290.00 =</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL:</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (1)</td> <td>(\$)</td> </tr> </tbody> </table>				Large Entity Fee (\$)	Fee Description	Fee Paid	770	Utility filing fee		340	Design filing fee		160	Provisional filing fee			Number Filed	Number Extra	Rate	Amount	Total Claims	- 20 =		x \$ 18.00 =		Independent Claims	- 3 =		x \$ 86.00 =		<input type="checkbox"/> Multiple Dependent Claim(s), if any			\$290.00 =		TOTAL:					SMALL ENTITY DISCOUNT:					SUBTOTAL (1)				(\$)																																									
Large Entity Fee (\$)	Fee Description	Fee Paid																																																																																									
770	Utility filing fee																																																																																										
340	Design filing fee																																																																																										
160	Provisional filing fee																																																																																										
	Number Filed	Number Extra	Rate	Amount																																																																																							
Total Claims	- 20 =		x \$ 18.00 =																																																																																								
Independent Claims	- 3 =		x \$ 86.00 =																																																																																								
<input type="checkbox"/> Multiple Dependent Claim(s), if any			\$290.00 =																																																																																								
TOTAL:																																																																																											
SMALL ENTITY DISCOUNT:																																																																																											
SUBTOTAL (1)				(\$)																																																																																							
2. AMENDMENT CLAIM FEES <table border="1"> <thead> <tr> <th>Claims Remaining After Amend.</th> <th>Highest No. Previously Paid For</th> <th>Present Extra</th> <th>Rate</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total</td> <td>-</td> <td>=</td> <td>x \$ 18.00 =</td> <td></td> </tr> <tr> <td>Indep.</td> <td>-</td> <td>=</td> <td>x \$ 86.00 =</td> <td></td> </tr> <tr> <td><input type="checkbox"/> First Presentation of Multiple Dep. Claim</td> <td></td> <td></td> <td>+ \$290.00 =</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL:</td> <td>(\$)</td> </tr> <tr> <td colspan="4" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td>(\$)</td> </tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (2)</td> <td>(\$)</td> </tr> </tbody> </table>				Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid	Total	-	=	x \$ 18.00 =		Indep.	-	=	x \$ 86.00 =		<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$290.00 =		TOTAL:				(\$)	SMALL ENTITY DISCOUNT:				(\$)	SUBTOTAL (2)				(\$)	SUBTOTAL (3) (\$ 950.00 SUBTOTAL (1) (\$) SUBTOTAL (2) (\$) SUBTOTAL (3) 950.00 TOTAL (\$ 950.00)																																																				
Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid																																																																																							
Total	-	=	x \$ 18.00 =																																																																																								
Indep.	-	=	x \$ 86.00 =																																																																																								
<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$290.00 =																																																																																								
TOTAL:				(\$)																																																																																							
SMALL ENTITY DISCOUNT:				(\$)																																																																																							
SUBTOTAL (2)				(\$)																																																																																							
CORRESPONDENCE ADDRESS				SIGNATURE BLOCK																																																																																							
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100				Respectfully Submitted,  Date: December 12, 2003 Reg. No.: 41,059 Tel. No.: (617) 248-7176 Fax No.: (617) 248-7100 Ira V. Heffan Attorney for the Applicant Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110																																																																																							